

FEE TRANSMITTAL

Electronic Version v08.

Stylesheet Version v08.0

Title of Invention	Cuffless System for Measuring Blood Pressure																							
Application Number :																								
Date :																								
First Named Applicant:		Matthew J Banet																						
Attorney Docket Number:		A-0003																						
TOTAL FEE AUTHORIZED \$ 425																								
Patent fees are subject to annual revisions on or about October 1st of each year.																								
Filing as small entity																								
BASIC FILING FEE																								
<table border="1"><thead><tr><th>Fee Description</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Utility Filing Fee</td><td>2001</td><td>385</td><td>385</td></tr><tr><td colspan="3"></td><td>Subtotal For Basic Filing Fees: \$ 385</td></tr></tbody></table>						Fee Description	Fee Code	Amount \$	Fee Paid \$	Utility Filing Fee	2001	385	385				Subtotal For Basic Filing Fees: \$ 385							
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EXTRA CLAIM FEES																								
<table border="1"><thead><tr><th>Fee Description</th><th>Extra Claim</th><th>Fee Code</th><th>Amount \$</th><th>Fee Paid \$</th></tr></thead><tbody><tr><td>Total Claims : 20</td><td>0</td><td>2202</td><td>9</td><td>0</td></tr><tr><td>Independent Claims : 1</td><td>0</td><td>2201</td><td>43</td><td>0</td></tr><tr><td colspan="3"></td><td>Subtotal For Extra Claims Fees: \$ 0</td></tr></tbody></table>						Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$	Total Claims : 20	0	2202	9	0	Independent Claims : 1	0	2201	43	0				Subtotal For Extra Claims Fees: \$ 0
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ASSIGNMENT FEES																								
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Recording Each Patent Assignment Per Property Fee	00000000	1	8021	40	40																			
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AUTHORIZED BILLING INFORMATION																								
The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:																								
Credit account number:		8844																						
Expiration Date (YYYYMMDD):		2006-06-30																						
Authorized name:		Morrison Ulman																						
Billing address:		94040																						